PREGNANCY PREVENTION INTERVENTION IMPLEMENTATION REPORT

Program Name: All4You!

Developers:

Karin K. Coyle, PhD; Douglas B. Kirby, PhD; Leah E. Robin, PhD; Stephen W. Banspach, PhD; Elizabeth Baumler, PhD; and Jill R. Glassman, PhD

Program Description and Overview

The primary goal of *All4You!* is to reduce the number of students who have unprotected sexual intercourse, which is associated with increased risk of HIV, other sexually transmitted diseases (STDs), and unplanned pregnancy. The program also aims to change key determinants related to sexual risk taking, such as attitudes, beliefs, and perceived norms. The target audience is students in alternative high school settings who are between ages 14 and 18. The intervention is designed to be delivered by health educators or classroom teachers during classroom sessions and service-learning visits in the community.

Core Components

Content Components

The core content areas are based on the behavioral determinants and underlying behavior change theories. The content is woven throughout the lessons, making it difficult to eliminate specific lessons without altering potential effectiveness.

- Functional knowledge (i.e., information that is directly tied to behavior such as steps for proper condom use, what behaviors increase risk of STD and HIV transmission).
- Attitudes and beliefs (i.e., activities that address perceived barriers to condom use or perceived risk of STD or pregnancy).
- Norms (i.e., activities that realign norms or facilitate the development of positive norms, such as seeing peer leaders model skills).
- Skills, including refusal/negotiation and condom use skills.
- Service learning activities, which are designed to influence behavior through factors such as sense of future or optimism and connectedness, including preparation activities for service learning visits.
- Reflection, which is designed to facilitate personal meaning and connections from the service learning activities.
- Individual commitment activity to solidify intentions toward positive behavioral choices and reinforce norms favoring such choices.

Pedagogy Components

All the activities should be implemented as designed, using the teaching strategies specified. In terms of pedagogy, this means that facilitators:

- Create a safe and effective learning environment by establishing group agreements, including mechanisms for asking sensitive questions and actively involving participants.
- Implement all activities in sequence using the interactive strategies included in the lessons, which were designed to influence the theory-based risk and protective factors related to sexual risk behaviors.
 - Use the varied pedagogical techniques (i.e., mini-lectures, brainstorming, games, small-group work, and role-plays) and maintain the interactive nature of the activities to engage youth and facilitate learning.
 - o Review learning from prior classes to enhance mastery of material.

- Use music as noted to create a positive environment for youth participation.
- Use the embedded skill development approach that explains and models the skills, provides large-group and individual practice, and offers corrective feedback.
- Use the question box technique to invite anonymous questions.
- o Provide student folders for service learning reflection.
- Conduct brief reflection activities immediately following the service learning visits and longer sessions at the outset of the following lesson (as structured in the curriculum).
- Use videos and guest speakers to enhance selected lessons. Replacement videos can be used if they are selected to meet the objectives of the lessons.
- Use pamphlets or fact sheets to provide succinct content summaries for reference outside the classroom.
- Use small gifts (e.g., pencils, pens, dog tags) to provide visual cues to reinforce program messages.
- Provide certificates to acknowledge students' completion of the program.
- Prepare students for their service learning by informing students on what to expect when they arrive and how they will be contributing at the site.
- Have adult chaperones monitor student engagement at the service sites, praising and prompting students' involvement.

Implementation Components

- All4You! can be implemented in either school or non-school alternative education settings, or mainstream settings that can accommodate the scheduling requirements. Ideally, the program should be implemented 2-3 times per week for a period of 5 to 7 weeks.
- All4You! consists of two primary instructional components that are integrated and delivered as a 14 session program (about 26 total hours):
 - 9 skills-based HIV, other STD and pregnancy preventions (70-90 minutes each).
 - 5 involving service learning visits in the community (140 minutes each including transportation to and from service learning site.
- The ideal group size is between 10 and 20 students.

Target Population

Target population evaluated

• The curriculum is designed for high-school aged participants (i.e., 14–18, or grades 9–12).

Program Setting

Program setting evaluated

 All4You! was evaluated between 2000 and 2003 in 24 alternative schools (specifically, community day schools) located in four large urban counties in northern California.

Program Duration

- All4You! consists of two primary instructional components that are integrated and delivered as a 14-session program (about 26 hours total).
 - A 9-session skills-based HIV, other STD and pregnancy prevention curriculum delivered in alternative school classrooms (13.5 hours total), and

- Five service learning visits in the community (12.5 hours total, including transportation).
- Ideally the program should be implemented 2–3 times per week for a period of 5 to 7 weeks.
- Each classroom session requires approximately 70–90 minutes.
- Each service learning visit requires at least 140 minutes (including preparation and transportation time).

Curriculum Materials

Curriculum materials are available from ETR Associates at www.etr.org/pub.

Adaptations

Basic allowable adaptations

 The <u>All4You!</u> adaptation <u>kit</u> is available through ETR Associates. This adaptation kit contains practical tools and resources to guide adolescent reproductive health practitioners in making effective adaptations and maintaining fidelity to the program's core components.

Program Focus

All4You! focuses on HIV, STD, and pregnancy prevention.

Research Evidence

Study Citation: Coyle, K. K., Kirby, D. B., Robin, L. E., Banspach, S. W., Baumler,

E., & Glassman, J. R. (2006). All4You! A randomized trial of an HIV, other STDs, and pregnancy prevention intervention for alternative school students. *AIDS Education and Prevention*,

18(3), 187-203.

Study Setting: Twenty-four alternative high schools in four large urban counties

in northern California

Study Sample: 998 alternative high school students:

• Over 90% of the participants were between the ages 14

and 17 years

• Approximately 30% Hispanic, 27% African American,

15% Asian American, 12% white, and 16% other

• 63% male and 37% female

Study Design: Cluster randomized trial. Thirteen schools were randomly selected

to implement the *All4You!* program and eleven schools were selected for a control group not offered the program. Surveys were administered before the intervention (baseline) and 6, 12, and 18 months after baseline. The intervention lasted 5 to 7

weeks.

Study Rating:

The study met the review criteria for a **moderate** study rating. It did not meet the review criteria for a high study rating because the rate of sample attrition was high among study youth.

Study Findings:

Six months after baseline:

- Adolescents participating in the intervention reported significantly lower frequency of sexual intercourse and intercourse without a condom in the previous 3 months, and were significantly more likely to report using a condom at last intercourse.
- The study found no statistically significant impacts on the number of sexual partners in the previous 3 months, on two measures of contraceptive use (number of partners without a condom in the previous 3 months, and use of effective pregnancy prevention method at last intercourse), and on initiation of sexual intercourse (among sexually inexperienced at baseline).

Twelve months after baseline:

 The authors assessed the same behavioral measures as at the 6-month follow-up, and found no statistically significant program impacts.

Eighteen months after baseline:

 The authors assessed the same behavioral measures as at the 6- and 12-month follow-ups, and found no statistically significant program impacts.

The study also examined program impacts on measures of HIV and condom knowledge, self-efficacy, attitudes, beliefs, and intentions. Findings for these outcomes were not considered for the review because they fell outside the scope of the review.

Last Updated: 05/31/2012